

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P97000050992**

1. Entity Name
T.C. POOL SERVICE, INC.

FILED
Sep 16, 2002 8:00 am
Secretary of State

09-16-2002 90110 007 ***150.00

Principal Place of Business

**6620 CLEVELAND STREET
HOLLYWOOD FL 33024**

Mailing Address

**6620 CLEVELAND STREET
HOLLYWOOD FL 33024**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0760344

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**WISLICENY, RICHARD
6620 CLEVELAND STREET
HOLLYWOOD FL 33024**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and filer if applicable

(NOTE: Registered Agent signature required when registering)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DPS	<input type="checkbox"/> Delete
NAME	WISLICENY, RICHARD	
STREET ADDRESS	6620 CLEVELAND STREET	
CITY-STATE-ZIP	HOLLYWOOD FL 33024	
TITLE	DVT	<input type="checkbox"/> Delete
NAME	WISLICENY, CECILIA	
STREET ADDRESS	6620 CLEVELAND STREET	
CITY-STATE-ZIP	HOLLYWOOD FL 33024	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
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STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cecilia C. Wisliceny

4/13/02 (954) 221-7205

Attachment

Dr. # P9700050992

872045

TC POOL SERVICE, INC.

6020 Cleveland BL

Hollywood, FL 33024

September 12, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302

To Whom It May Concern:

Enclosed you will find a copy of the 2002 Uniform Business Report for TC Pools (FEI 65-0760344) as well as check # 3498 in the amount of one hundred fifty (\$ 150.00) dollars.

I originally sent check # 3385 in April, 2002 along with the original completed report. When I noticed that check 3385 was not presented to my bank, I began calling (850) 488-9000 to see if your office received my check and was informed on more than one occasion that the department was behind and to call back in another week.

When another week arrived, I again called and was told if I wanted to send in another check with a copy of the original report I could do so, but nobody could tell me what would happen if the department ever received the original. I am not able to wait any longer. I have placed a stop pay on check # 3385 and have enclosed another in it's place.

I understand that there is an additional late fee in the amount of \$ 400.00. It would be greatly appreciated if this fee could be waived. TC Pools is not a large company making a great deal of money. Your cooperation in this matter is greatly appreciated. Thank you.

Sincerely,

Cecelia C. Wisliceny

Cecelia C. Wisliceny